

CITY OF FRAMINGHAM

Public Health Department



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Sewage Disposal System Abandonment Application

Complete the following application. Please print legibly. Incomplete application and missing documents may delay the review and abandonment process.

Date:
Owner Information
Name of Property Owner:
Address:
Phone Number: Email:
Sewage Disposal System Location
Address where the sewage disposal system is located: Check if address is the same as above
Installer / Contractor Information
<u>Installer / Contractor Information</u>
Name of Installer / Contractor:
Name of Installer / Contractor:
Name of Installer / Contractor:
Name of Installer / Contractor: Address:
Name of Installer / Contractor: Address: Phone Number: Email:
Name of Installer / Contractor: Address: Phone Number: Reason for the Abandonment:

If the above listed property (where the sewage disposal system is to be abandoned) is being connected to a private or municipal sanitary sewer system, a copy of the sewer connection must be submitted with this application.

The following steps are required in order to properly abandon the existing sewage disposal system:

- 1. The septic tank shall be pumped of its entire contents by a licensed septic / sewage hauler.
- 2. The tank shall be excavated and removed from the site.
- 3. The bottom of the tank shall be opened or ruptured after being pumped of its contents to prevent retainage of water.
- 4. The tank shall be completely filled with clean sand, common fill or other suitable material approved in writing by the Board of Health.

Once the abandonment has been witnessed, further use of the system for any purpose is prohibited and a Certificate of Sewage Disposal System Abandonment will be issued. Proposed Date of Scheduled Abandonment: Signature: Print: Submit the following: ☐ Completed Septic System Abandonment Application. Fee of \$25.00 made payable to the "City of Framingham". At this time, credit cards are not accepted. П All fees are non-refundable. A copy of the septic / sewage hauler pump report for the above sewage system disposal abandonment. For Official Use Only Name of Inspector: _____ Signature: Date Abandonment was witnessed: Date Certificate of Septic Abandonment was issued: **Additional Notes:**

Proper abandonment of the septic tank or cesspool must be witnessed by the Framingham Department of Public Health. Please provide at least two days (48 hours) advance notice.